

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	6		10-22-99
FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
3	3	7	1/4
7	7	21	5/21
02	02	03	9/29
3	—	✓	X
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If more than 150 claims or 10 actions  
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Claim	Final	Original	Date
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